SERIAL NO. FILING DATE MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) APPLICANT(S) 10/018904 CLAIMS AFTER 1st AMENDMENT AFTER 2nd AMENDMENT AS FILED IND. DEP. IND. DEP. IND. DEP. DEP. IND. DEP. IND DEP. !4 ?7 . 1 . 3 .6 fAL TOTAL TAL TOTAL DEP. AL MAY BE JED FOR ADDITIONAL CLAIMS OR AMENDMENTS POTONT ONE TO THE TOTAL COMMERCE POTONT ONE TO THE TOTAL CLAIMS OF AMENDMENTS POTONT ONE TO THE TOTAL CLAIMS OF THE TOTAL CL